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MR. SKEY'S LECTURE ON THE PRINCIPLES OF TREATING DISEASE.

[Continued from page 312.]

THESE primary principles admitted, we proceed to the theory or principles which more immediately influence our treatment. I have already stated them as "general rules, which, though modified by circumstances, are applicable to all similar examples of disease." Now there is an obvious distinction between the theory of a disease and its treatment. By theory we understand the contemplation of, the reflecting or reasoning upon, a subject. This one would suppose an essential prelude to the treatment of all maladies; but it is not really so, inasmuch as the principles of life, or, rather, the views and objects which nature may have in contemplation in the cure of any particular disease, may not be so obvious as to obtain the unanimous concurrence of all physiologists. They may be susceptible of various explanations; whence the number of irreconcilable views taken by different authorities; and, as regards many diseases, their treatment was adopted on unknown or ill-understood data, and numerous theories have been based upon them, to suit the prejudices of their numerous inventors. There is a natural and well-grounded prejudice against what are called *theorists*. The tendency of a man's mind to theorize is, *ceteris paribus*, just proportionate to the activity of his imagination, and as nature has so ordained it, men's judgment is ordinarily defective, as their imagination or love of speculation is acute. Thus it is that minds naturally imaginative, whose flights of thought equal in celerity the movements of the playful Puck, "who could put a girdle round about the earth in forty minutes," and whose speculations cost them neither time nor labor, see through the mysteries of diseased action, trace the movements of the master mind that wills it, "and give a local habitation and a name" to the self-created authorities of their ill-guided imagination. It is not from men so gifted that our profession will derive much advantage or instruction. Pray you avoid them.

There is another class of men, the objection to whom is so closely associated with the preceding, that I cannot forbear alluding to them,—they are mathematical surgeons. A man's mind that has been long accustomed to direct and palpable evidence, and whose conclusions are inevitable, though the very reverse of the imaginative, endeavors to reduce the question of principle to the level of direct reasoning, and will believe nothing that he cannot explain upon the same irrefragable principles of reasoning, as lead to the positive deductions of mathematical science. The tone of mind which this study engenders, appears to me not the most desirable for a practitioner of our art, notwithstanding the immense advantages which it affords in invigorating the reasoning powers. I should be sorry to be supposed desirous of withholding my tribute of admiration for highly-cultivated intellect or reasoning power; but I assert, that so long as the data are but imperfectly known or understood, and until the principles of life and the nature of their operation are brought within the grasp of our comprehension, that man's practice must be (to use the mildest term) most imperfect, who would postpone for one hour the application of a remedy because he could not explain the rationale or the principles of its action; and there are too many practitioners of this class.

With the action of how few of the innumerable remedies of our Pharmacopœia are we thoroughly acquainted! This may be deemed a species of empiricism, but within a certain restraint it is essential to every practical department of our profession. You must not expect, then, that you are entering on a study, the principles of which can be reduced to a course of reasoning as certain and as conclusive as that of mathematical science. Empiricism means practice. It consists in the application of remedies which experience has taught us the value of, but which we have obtained through any means but those of reason. Take, for example, the treatment of some forms of disease of the testicle. We find them essentially benefited by the use of emetics. What is the rationale of this? Does the disease depend on a morbid condition of the stomach? If so, a form of aperient that would relieve it of its contents in common with the whole of the intestinal canal, ought to accomplish the same end; but it does not. Local depletives, aperients, diaphoretics, are equally inefficient, and an emetic finally removes the evil. Now the stomach and the testicle have neither vessels nor nerves in common. It is referred to sympathy. Is this satisfactory? To me I confess it is not, and in the state of our knowledge I should largely prefer acknowledging my entire ignorance of the *modus operandi* of the remedy, than I would mask the real difficulty by a pretended explanation, that would never be borne out by close physiological investigation. The conviction of our ignorance is the first step towards the improvement of our knowledge.

But, in the mean time, shall we withhold the emetic till we can explain the phenomena of its use? Certainly not; therefore the practice by empiricism is a necessary part of our duty. The late Dr. Gooch, the most able and most amusing lecturer of the day, was in the habit of recommending to his class some forms of medicine, which comprised a combination of a large variety of medicines in a single dose. In commenting on this "mess," as he was accustomed to denominate it, he used to say, "I combine these medicines together, because I find them answer the object I have in view; I do not attempt to explain the theory of their application; but I find them useful, therefore I employ them." With regard to this subject, let me observe, that the chief object of my reference is, that I am desirous that you should not commit yourselves to an explanation of the *modus operandi* of a remedy, unless you see its operation clearly and distinctly. Its consideration will conduce to a most important end,—that of leading you to *reflect* and *reason*,—to establish, as your groundwork, clear comprehensive premises, on which your treatment is based; to eschew the jargon of words with which the really ignorant man involves in a mystery of technicalities the statement of his opinions, and to endeavor to trace the workings of disease by simple and concatenated steps to their ultimate termination. I attach the highest value to that instruction which teaches simple principles,—which places before the eye of the student the first processes of disease. I should be content, rather, were he about to abandon instruction, to place him in the path of improvement, having adopted simple and distinct, but intelligible views of the early stages of disease, than I would endeavor to elicit his interest or his attention by vivid descriptions of extensive and uncontrollable disease. I should prefer to study nature in a case of common ulceration, in which my assistance might be valuable, to pursuing the endless ravages of a malignant growth, of the nature and source of which I may be totally ignorant, and in which the only advantage I could confer would be sympathy for the sufferer. And here let me advert to a common error among students, which owes its existence to a defect in their education,—that of misnaming cases of disease by the application of the epithet "*good.*" You hear that Mr. So-and-so has a "good case" in such a ward, or "a good case of accident has just come in; they are gone for the surgeon to cut his leg off." Gentlemen, these are not good, but "bad" cases,—bad in every application of the word,—bad as regards the patient, for his body is mutilated by the knife,—bad as regards the art, for they justly expose it to obloquy,—and bad as regards yourselves, for they afford you no knowledge beyond that derived from beholding a painful operation, which you may possibly witness for the first and last time in your lives. I conceive a good case to be susceptible of relief or cure, and then the more extensive the malady, the greater the "goodness,"—a case in which the art of the surgeon triumphs over disease, efficiently co-operating with nature in its eradication,—not one in which the surgeon takes the case into his own exclusive charge, and effectually extirpates it by the amputation of the limb of which it formed a part.

Now, gentlemen, if for the purpose of warning you against unphilosophical and unreasoning views, of exposing to you the real level of our knowledge, and of preparing you for the necessity of availing yourselves of the aid of remedies, the action of which in the present state of our knowledge admits of no satisfactory solution, I have for one moment become the advocate of empiricism, I trust that the principles of education I have subsequently advocated will guarantee to you my conviction of its utter incompetency to advance professional knowledge. Empiricism may be employed as the refuge, without being the cloak of our ignorance. It may prove a valuable resource. It may temporarily represent, it can never supersede, the practice of reason. We may employ it as the homage due to the unexplained mysteries of nature; but it must ever be deemed a detracting blot on the real dignity and intellectual rank of our profession.

[Mr. Skey's remarks on the subject of *treatment*, which occupy the remainder of his lecture, will be given in a future Number.]

REMARKS ON DR. BELL'S PRIZE ESSAY.

To the Editor of the Boston Medical and Surgical Journal.

DEAR SIR,—I have read, with considerable interest, the Prize Dissertation on Diet, by Luther V. Bell, M.D. as it has appeared in four or five successive numbers of your Journal, and with your permission I will venture to make a few comments on it. It is not, however, my intention to enter into a critical and elaborate examination of the merits of Dr. Bell's performance. Were I disposed to follow his own lead, and to use his own weapons, it would require no great skill nor power to annoy him exceedingly; and if I should not be able to give him any deep wounds, I might, with great ease, at least, excoriate him from head to foot, and leave him smarting more cruelly than he would from a more fatal thrust. But though Dr. Bell has indulged quite as freely in *sneer* and *sarcasm* as becomes any gentleman, when gravely discussing an important practical subject which requires sound and candid reasoning, I do not feel that it would be suitable for me, even under such provocation, to take up his weapons and attempt a gladiatorial display in his own style. The subject propounded for his consideration is of very great importance to mankind, and demands serious inquiry and deep and honest examination:—and either this business of offering a prize for the best dissertation on the diet of New England, is purely a farce, or else it is intended to concentrate all the light that can be gathered in relation to the question, for the benefit of the people of New England. Regarding this latter view of the subject as the true one, I am sorry that Dr. Bell has not been careful to produce a dissertation on this occasion, as *entirely* worthy of the confidence of the good people of New England, as, I am sure, he has the talents to do. I say as *entirely* worthy, for in many respects he has done justice to the subject, and presented it in a true light; and I am willing to believe that he designed to be correct in all the views advanced; but surely if Dr. Bell will candidly review his own performance, he cannot but perceive that he has blurted out much that is purely gratuitous and by no means remarkably respectful to gentlemen older, more learned, more experienced, and more cautious, than himself, in his own profession. And this is one of the rocks against which Dr. Bell frequently strikes, and always to his own disadvantage. With not a little arrogance he continually assumes that *all* those who maintain opinions contrary to his own on the subject of the natural and proper diet of man, are mere "Utopian dreamers," fanciful speculators, weak-minded religionists, &c. Dr. Bell will, I hope, pardon me if I respectfully say to him, that there are those, among the number that he very modestly denominates "Utopian dreamers," who are prepared to meet any one that he can bring, on the opposite side, in the severest tests of profound scientific research and discussion.

I am sure that no man living has a higher and more cordial respect for the medical profession than I have, and I cannot believe that any one is aiming and endeavoring more sincerely to elevate and honor that profession; and it is this feeling, more than any other, that now prompts me to notice in this manner the performance before me: yet my respect for the *profession* as an important function in the system of civic life, by no means begets in me such a reverence for the opinions of its members as to prevent my examining those opinions with the utmost freedom and scrutiny. A familiar acquaintance with the history of medicine, from the days of ancient Egypt to the present time, is not at all calculated to increase one's confidence in the infallibility of any man or set of men in the medical profession ;—nevertheless, it cannot justly diminish one's respect for the profession itself. While the nature and condition of man are what they are, the medical profession will always necessarily be an essential element in the constitution of well-regulated society ; and its true adaptation to the welfare of society requires that it should occupy a station of the highest dignity and respect, and deserve and receive the fullest confidence of every member of the community. But this constitutional relation of the profession itself to other elements of society, does not necessarily elevate and dignify every individual who may formally enter it, nor prevent the physician from sinking his own medical character far below the true dignity of the profession. Every honest and true friend to society, therefore, must desire to maintain the high dignity of the medical profession ; and he who would do this, must endeavor to elevate the medical character of every physician to the true dignity of the profession. And he most eminently effects this, who does most to make physicians truly acquainted with the real nature and condition of man.

While, therefore, a proper respect is paid to the opinions of others, every lover of truth and of the true interest of the human family should endeavor, as far as possible, to examine for himself, thoroughly and honestly, every important question which he attempts to discuss for the benefit of others ; and most especially those questions which are very nearly associated with the vital interests of the human race. Evidently true as this sentiment is, a disregard to it has led to the most extensive propagation and perpetuation of error from age to age through many hundred years ; and it is from a disregard to this manifest truth, that Dr. Bell, in his Prize Dissertation on Diet, has become the propagator of errors whose only authority is popular ignorance and depravity, backed by the superficial and fanciful speculations of individuals who have unjustly received the confidence of the world as scientific men.

To medical quacks, and every species of medical quackery, it is of utmost importance that popular error and ignorance should be propagated and nurtured as extensively as possible ; but such error and ignorance are the deadliest foes to the true dignity of the medical profession ; while, on the other hand, the universal diffusion of the light of scientific truth is the surest death-blow to quackery of every kind, and serves with greatest certainty to secure the true dignity of the medical profession, and the best interest of society ; for the relation between the elevated and true dignity of the medical profession and the best interest of society, is such, that the one cannot exist without the other.

I have already remarked that it is not my intention to enter into a critical examination of Dr. Bell's performance ; still less do I design to assume a controversial attitude towards him. But believing that the subject on which he has written was honestly propounded as the subject of a prize dissertation for the purpose of eliciting the truth, and of bringing before the minds of the people of New England such information as would be of practical value to them, I address myself to those who have propounded this subject, and offered the prize—to the physicians of New England, and to the New England people generally, rather than to Dr. Bell personally. And in doing this, one object is paramount with me—and this is, the exhibition of the truth for the good of my fellow creatures. If there be a man living who loves New England—her institutions and her prosperity—and who desires to do all in his power to cherish and perpetuate her welfare, I am one : and this zeal would have gone far to induce me to become a competitor for the prize awarded to Dr. Bell, had I known that such a subject was propounded, before the prize was awarded. Not for the prize's sake would I have written, but for the truth's sake, and in the spirit of philanthropy.

To the medical fraternity of New England, then, I will respectfully say—Gentlemen of an honorable and most responsible profession, there can be no just reason why you should regard me, or my humble labors, with the least degree of jealousy or prejudice. Neither in object nor in effort am I an enemy to your profession. Is there a man among you who would wilfully sacrifice the cause of truth and the best interests of humanity to the supposed advantages to be derived to a temporary self-interest, by the propagation of ignorance and error ? God forbid ! But, gentlemen, is there not, as a general statement, a natural propensity or disposition in man to cling to established institutions, and to reverence hereditary usages ? and while this quality in human nature serves greatly to give stability to the forms of society, and in this manner perhaps generally contributes more to the good than to the evil of the race, does it not also serve to perpetuate every species of error, and to retard the progress of society towards the highest and best condition of which the nature of man is capable ? And is it not possible that this very quality of our common nature, may even lead the medical fraternity, in some instances, to defend the hereditary opinions of their profession with more zeal for their authority than enlightened conviction of their truth ? Gentlemen, can you look back over the history of your profession, even for a single century, and not be convinced that the review affords you abundant reason why every one of you should think, and investigate, diligently, profoundly and perseveringly, for himself, on every subject belonging to his profession, rather than passively receive any man's opinion as indubitable authority ? Thank heaven ! professional as well as political despotism and aristocracy are rapidly retreating before the intellectual and scientific democracy of the world, and God grant that the time may soon come when the sovereignty of truth and virtue shall be the only authority which mankind will acknowledge.

Gentlemen, however such a state of things may affect individuals among you, be assured your *profession* has nothing to fear—but much—very much, to hope from it. Nothing is more certain than that the more clearly and accurately the people understand the true character of your profession, the higher will be their respect for it—the greater will be their confidence in it ; and the greater, also, will be their contempt for every unworthy member of it ; and the deeper will be their abhorrence and detestation of every species of quackery.

But, to our subject.—" If man were obliged to abstain totally from flesh, he could not, at least in our climate, either multiply or exist. An entire abstinence from flesh can have no effect but to enfeeble nature. To preserve himself in proper plight, man requires not only the use of this solid nourishment, but even to vary it. To obtain complete vigor, he must choose that species of food which is most agreeable to his constitution ; and as he cannot preserve himself in a state of activity but by procuring new sensations, he must give his senses their full stretch, and eat a variety of meats, to prevent the disgust arising from a uniformity of nourishment." Such are the opinions of the celebrated Buffon, and such are the opinions that have been received and defended almost universally throughout that portion of the civilized world in which flesh constitutes a part of human aliment. Yet can any intelligent and candid man pause for a moment to examine these statements, and not be astonished that notions so manifestly erroneous could gain such general acceptance among men claiming to be learned and scientific ? The facts that man *can* subsist on a mixed diet of vegetable and animal food, and apparently do as well on it as on any other—and that a considerable portion of the human family have, at least for centuries, subsisted on such a diet,—and that those who have been accustomed to a free use of flesh, generally suffer a temporary physiological depression from the sudden and total abstraction of it, are the only real data on which the doctrine of the necessity for a portion of flesh in the diet of man has been founded. Until a recent period, however, the advocates for this doctrine have universally and zealously insisted that it is fully supported by the evidence of comparative anatomy ; and while they were permitted to wield this argument, they failed not to urge it on all occasions, when the subject was agitated, as conclusive and incontrovertible. But *now*, when the tables are turned upon them, and they are compelled to acknowledge that all the evidence of comparative anatomy goes fully and conclusively to prove that man is naturally a frugivorous animal, they affect to sneer at their opponents for urging so weak an argument, and gravely tell us that man is not a mere creature of *instinct*, but is endowed with *reason*, by which he is enabled to adapt things to his use which are not naturally fitted for him. But will these gentlemen pretend to say that any amount or degree of reason in man can enable him to nullify the constitutional laws of his nature ? This argument, like that founded on the fanciful evidence of comparative anatomy, is based on error, and evinces a want of profound knowledge in physiological science. The beaver, when he wants to build a dam, is taught by a species of reason (for *instinct* cannot teach him this), to go up stream and gnaw down a tree standing on the bank, so that it may fall into the water and float down to the place where he wants it ; and man, less by his superior reason than by his superior voluntary powers, is enabled, when he can find no tree above the place where he wants it, and can find one below, to fell the tree into the stream and force it up against the current. But do these superior endowments in man in any degree nullify the law of nature which causes the tree or log naturally to float down stream ? and does not man, by transgressing that law, necessarily suffer the penalty ? Does he not have to expend more or less of time and force, which would not be requisite if, like the beaver, he could and did conform to the laws of nature ? Most evidently so. Man's superior endowments, therefore, while they enable him in some measure to counteract the laws of nature, cannot save him in any degree from the *friction*, if I may so speak, which his resistance to those laws necessarily causes. And this is strictly true in regard to the physiological laws of man's nature. We possess, to some extent, the physiological *capability* of adapting ourselves to conditions and things to which we are not *naturally* adapted; and we possess the rational and voluntary powers of adapting many things to our *use*, which are not *naturally* fitted for us ; nevertheless, all departure from the constitutional laws of our nature, in the exercise of these *capabilities*, is always, and necessarily, attended with commensurate injury to our physiological interests ;—and if the advocates for flesh-eating will examine the subject honestly and thoroughly, they will find that all the physiological and psychological, as well as all the anatomical evidence in relation to the natural dietetic character of man, goes wholly and conclusively to prove that man is *naturally* a fruit and vegetable eating animal.

Boston, December 21, 1835. S. GRAHAM.

(To be continued.)

CLINICAL LECTURES OF M. LUGOL ON SCROFULOUS DISEASES.

DELIVERED AT THE HOSPITAL OF SAINT LOUIS. LECTURE II. THE CAUSES OF SCROFULA.

TRANSLATED BY J. CHICKERING, M.D. BOSTON.

[Communicated for the Boston Medical and Surgical Journal.]

AT the last meeting I stated that we might consider scrofula as a general disease dependent on organic weakness and imperfection, the consequence of faulty nutrition, and affecting chiefly the great lymphatic system in all its tissues. At this time I shall speak of the predisposing and occasional causes of scrofula.

Among these last we must include in the first rank, climate. Scrofula is more common in Europe than in other countries, but it does not prevail indiscriminately in all the countries of our continent. This disease is more common in England and Holland than in Spain and Italy. In some provinces of France, as Lower Brittany and Auvergne, it is, we may say, epidemic, while it is rare in Provence. The air, that universal agent, appears, in certain states, to have great effect in producing scrofula, especially when there is a deficiency of solar influences, and, according to M. Humboldt, where there is a diminution of electricity ; these circumstances are likely to make the white fluids predominate, to stimulate their secretion, and produce in man the same effect (étiolement) that is observed in vegetables subjected to the same atmospheric constitution. Thus, in our great cities, as Paris and Lyons—in the low, damp and filthy quarters, where the narrow and close streets with difficulty permit the circulation of the air, and the entrance of the genial rays of the sun, and where a numerous population are crowded together, subjected to all the privations of wretchedness, nothing is more common than to meet with persons presenting a living picture of the scrofulous diathesis in the last stage, and dragging out the rest of existence amidst a train of infirmities

The people of the country are sometimes no better off; their dwellings, surrounded by offensive matters and stagnant waters, do not allow the free access of the air, and, at the same time, they are seats of vice.

Occupations.—Writers regard as predisposing to scrofula, certain occupations, such as that of tailors, shoemakers, and weavers. In Bourgogne, for example, where the weavers work in deep, damp, dark and badly-aired cellars, these unfortunate people are numerous, who seek in our hospitals the aid of medicine for an inveterate disease, which has already made frightful ravages, and often beyond the resources of art.

Seasons.—Spring and autumn seem favorable to the production of this disease. The heat of summer, on the contrary, frequently causes a resolution of the engorgements.

Food.—The mode of living has great influence in producing scrofulous affections. Heavy and indigestible food which, in a large quantity, contains but little nutriment, or what has become deteriorated so as to furnish chyle only of a bad quality, and which fatigues and irritates the digestive organs, is a very frequent source of scrofula.

The use of muddy waters, excluded from the air, and charged with foreign matters, and of difficult digestion, as cistern water, &c. contributes to develope this disease. Thus, at Rheims, as soon as river water was substituted for well water, the number of those with goitre and other scrofulous affections, so considerable among its inhabitants, was sensibly diminished.

Previous diseases.—Some authors, as Stoll, Astruc, Lieutaud, &c. have thought that scrofula depended on the effects of the syphilitic virus, an opinion which is contradicted by the historical fact that scrofula was known long before the discovery of America.

Moral Causes.—The depressing and melancholy affections derange the organs which may become the seat of scrofulous disease. We have seen this predisposing cause developed in children whose mothers suffered from the depressing passions during gestation, and the scrofulous diathesis was frequently observed during the storm of the revolution. Pinel and M. Richerand have remarked that children supported by charity in the hospices, and early feeling their desolate situation, give way to melancholy which remarkably predisposes them to this disease.

Hereditary.—Of all the predisposing causes to scrofula, the most powerful is doubtless that from parents; this is now incontestably true. Most of the patients whom we have met, tell us that their father, mother or ancestors, were affected with scrofula, and that their brothers and sisters were likewise affected with it; so that we believe that scrofula is as much hereditary as any disease.

Some explanation is here necessary. Scrofula is not hereditary in the common acceptation of the word. We receive from our parents a disposition to contract it, in consequence of an organization similar to theirs, and not because the germ of the disease is implanted in us. It is not necessary that parents should be affected, to give birth to scrofulous children. In fact, when married persons are too young or too old, and their health has been impaired by excess, almost always their children are badly organized. The hereditary influence is not always direct; a scrofulous father may have healthy children who will not manifest through the whole of their lives any symptoms of the disease of the parents, but all or some of their children will be affected with scrofula. It seems to us, in this case, that the expression *hereditary* is correct. Experience teaches that parents, married at a late period, are more likely to give birth to scrofulous children. The feebleness of such parents, and certain diseases which they may have contracted, and to which they are still subject—phthisis, for example—have a lamentable influence on the impregnated germ and on the nutrition of the fœtus.

DEATH FROM ARSENIC, TAKEN BY ACCIDENT FOR CALOMEL AND JALAP.

[The following account of a death from poison was elicited by some remarks in the 7th No. of this Vol. of the Journal, respecting a sudden decease attributed to the effects of a dose of calomel and jalap, in which the proportion of the former ingredient was *supposed*, very gratuitously, to have been too preponderating to be overcome by the purgative operation of the latter. We fully agree in the opinion expressed by our correspondent, that death in this case was occasioned by a dose of arsenic, and not by calomel and jalap.—Ed.]

F. A. D. aged 23, clerk, took at 2 o'clock, in the morning of Sept. 4th, a powder, which was followed by vomiting in the course of half an hour; soon afterwards, several dejections. Vomiting and purging, at short intervals, continued through the day. Evacuations consisted mostly of a serous fluid and bile. Quantity vomited during the day amounted to six or eight quarts by estimation. In the afternoon, on attempting to walk from one bed to another, he fell down senseless, was convulsed, had cramps in extremities, and was cold. At 7 in the evening, which was seventeen hours after the taking of the medicine, I saw him and found him as follows. Extremities cold, bathed in perspiration; skin blue and corrugated, feeling as if parboiled; no pulse perceptible at wrist; pulsations of carotids rapid and fluttering; eyeballs retracted in orbits; countenance livid; voice husky and guttural; extreme thirst; distress at epigastrium; frequently vomiting; mind clear; no dejections after first visit; his whole appearance was much like that of a person affected with malignant cholera.

He was told at once that he had taken a poisonous substance; and on being questioned in regard to the medicine he had taken, he said he obtained it eighteen months since in the city of New York, for calomel and jalap, put it into his trunk (where it had remained till the evening before he took it), went a voyage to Europe, and had lately returned to his native place. For a few days past, he had been suffering with pain in his head—a complaint he was subject to, and for which he procured this powder. This he took in molasses, at the time above stated. He remarked that the powder was of a yellow color, and in quantity about a teaspoonful. None of the powder could be obtained from the paper, spoon, or vessels into which the evacuations had been received.

Laudanum, wine and brandy were given internally, and friction and dry heat applied externally. Whites of eggs, lime water, &c. were ordered to be given; but all without any material benefit. Cramps and coldness of extremities increased, vision failed, voice faltered, throat became dry, tongue swollen, annoyed by hiccoughs, delirium, and at last death ensued, which took place at 3 o'clock in the morning of the 5th, making twenty-five hours from the time the medicine was taken. Permission to examine the body after death could not be obtained; therefore the character of the medicine he took must be inferred from the symptoms of the case, which accord well with those symptoms stated by the best authors as following an over-dose of arsenic. Mr. D. had the same symptoms that two other persons presented who took arsenic, as they confessed while living, and whose bodies were examined after death. His case resembled theirs so closely, from its commencement to its termination, that there was not any doubt in my mind that death was produced by the same cause. T.

CÆSAREAN OPERATION.

A BRIEF notice of this operation, performed by Professor Gibson, of Philadelphia, was given on the 211th page of our last volume. The following particulars of the operation are from the Professor's recent edition of the Institutes and Practice of Surgery.

"A firm table was selected, and covered with a mattress and sheets, the patient placed upon it, on her back, and her pelvis and shoulders supported by pillows. In presence of Dr. Nancrede, Profes. Dewees, Dr. Dove, of Richmond, Professor Horner, Dr. Beattie, Dr. William Coxe, Dr. Theodore Dewees, and my son, Charles Bell Gibson, I made an incision, at the centre of the linea alba, commencing about an inch below the umbilicus, through the integuments, and extending nearly to the pubes. To save the patient pain, and to prevent this first, or perpendicular cut, from penetrating too deeply, I requested Dr. Horner to fold up the skin with his fingers, and while thus held I passed the knife through it with its back towards the abdomen. The superficial fascia being exposed was divided, then the tendons of the abdominal muscles, next the peritoneum, and lastly the body of the uterus, all to the extent of six inches. The uterus, however, at this stage of the operation, was not cut entirely through, but a line or two in thickness of the interior of its walls left, with the view of drawing off the waters before I opened the womb, penetrated the membranes and exposed the child. At my request, Dr. Nancrede introduced a finger into the os uteri and endeavored to rupture the membranes, but could not succeed. A similar attempt was made by Dr. Beattie, which also failed. Having resumed the knife, the remaining fibres of the uterus were divided, the membranes exposed, and cautiously opened by running Cooper's bistoury for strangulated hernia, upwards and downwards, to the extent of six inches, while Dr. Horner held closely together the sides of the wound, to prevent protrusion of the intestines and the escape of any portion of the waters into the bag of the peritoneum.

"There was a right lateral obliquity of the uterus, and the position of the child found to correspond with the third breech presentation of Baudelocque. Dr. Beattie then introduced his hand, and drew out the feet, while Dr. Nancrede supported the hips and back, and removed the body, and lastly, the head of the child, from the womb. It proved a girl of large size, and apparently healthy. For some seconds, however, it did not breathe, and, indeed, not until friction on the chest, blowing into the mouth, and the introduction of a few drops of brandy, were resorted to. The cord being cut, the child was removed, and in a short time cried lustily. Whilst Dr. Horner still kept the sides of the wound together, Dr. Beattie extracted without difficulty the placenta and membranes, and at the same time pushed a finger from the interior of the uterus through the os tincæ, to make a free communication with the vagina. During these manipulations, two portions of intestine, each the size of a pigeon's egg, protruded on the right side of the uterus, and near the upper corner of the wound. They were readily kept back, however, and did not again protrude; nor did any fluid, so far as could be observed, find its way into the peritoneal bag. No hæmorrhage took place from the removal of the placenta, nor was it necessary to secure a single vessel with the ligature. There was a visible contraction of the womb, after the removal of its contents, and the incision in it had sensibly shortened in the course of a few seconds.

"My attention was next drawn towards the closure of the wound. With great care, and the utmost nicety, the edges of the peritoneum, muscles, and integuments were held together by assistants, while I passed, successively, three stout silk ligatures, in form of interrupted suture, through the integuments—avoiding the peritoneum and muscles—an inch and a half from each other, and supported the whole by adhesive straps, lint, a compress and roller around the abdomen. To give vent to any secretion of serum or pus, the lower angle of the wound was left open for the space of half an inch. The patient was then raised very carefully by several assistants, and laid in bed upon her back, and great pains taken to render her position as comfortable as possible, and to prevent the slightest movement. There was less difficulty in this respect than could have been anticipated, arising partly from the little pain, comparatively, during the operation, the natural firmness and equanimity of the patient, and her faithful reliance upon Providence for a happy issue out of her affliction. Under the cheering influence of such feelings, she slept soundly for several hours, and did not change her position in the slightest degree.

"By Drs. Nancrede, Beattie and myself, she was visited, for a week or ten days, three times a day; was kept entirely on barley water, during that time, under the influence of an occasional opiate at night, took now and then small doses of magnesia, or used enemata; had her diet gradually increased; on the twenty-fifth day after the operation was enabled to sit up,—the wound, with the exception of a single spot, the size of a pea, being entirely cicatrized—and finally recovered, and now enjoys, together with her child, perfect health."

CASE OF MONSTROSITY.

The following case is related by Dr. C. J. Blackburn, of Woodford Co. Ky. in the last No. of the Transylvania Med. Journal.

Mrs. Sullivan, of this county, was taken in labor on Sunday, the 19th of Sept. eight months, she supposed, after conception. The liquor amnii was evacuated; the pains continued until the 21st. I saw her that day, at nine o'clock, and upon examination found that the hands presented. These being returned, and the feet brought down, I attempted delivery, but finding that the child did not progress, I made another examination, and then discovered that there were four feet presenting. I tried to return two of the legs, but found it impracticable. It occurred to me at this moment that there must be a union of the children, which on examination I found to be the fact. In this state of things, nothing was left but to bring down both children at the same time, and thus accomplish the delivery. It was effected in the following manner:—The patient being placed on the lap of an assistant, with her feet resting on the rounds of two chairs; taking hold of all the feet and waiting for a pain, which soon came on, I very easily delivered all but the heads of the children, one of which pressed the pubis, the other the sacrum. These being turned, one opposite the right, and the other the left, acetabulum, I experienced no difficulty in completing the delivery.

At birth one of the children was alive—the other in a state of asphyxia, in which it remained about an hour, but vitality commenced at the point of union, and progressed slowly, until it had extended half way up the body. The child then began to gape, and in a short time the circulation became general. On inspecting the connection between the children, I found it, as nearly as can be described, as follows: The backs were united obliquely, commencing at the os sacrum, and extending down to the coccyx. The right nates of the right child, and the left of the left, formed a complete buttock, resembling the nates of an infant. Between these was the anus, common to both, and immediately beyond this, the pudendæ of each united, the labiæ being incomplete, inasmuch as they formed but one for each child. The mons veneris, clitoris, &c. were complete, as also the nymphæ, and the urethra, each vagina being imperforate. The innominatæ were united at the sacrum, which was larger than natural, and common to both children. The umbilical cord started single from the placenta, but in about thirteen inches bifurcated, and sent a branch to each child. One branch was nine, the other seven inches long, from the bifurcation, the longest supplying the most vigorous child. At the point of separation, the arteries of each cord divided, as did also the veins.

At the age of three weeks, the children were vigorous—each crying, sleeping, eating, and moving independently of the other. They died of dysentery, the most vigorous about five minutes before the other, having also been affected three or four days earlier. Near the time of their death, they were both similarly affected.

Upon dissection after death, the osseous union was found to commence at the superior portion of the sacrum, extending to the inferior extremity of the coccyx. The cavity of the pelvis of each, was separated by the peritonæum of each, which formed two laminæ or folds. I passed a probe in a direct line with the umbilicus, and met with no obstruction except these folds of the peritonæum, which were about the eighth of an inch apart.

But for the disease which carried them off, having no connection with their deformity, these children might have survived, presenting the world with a more remarkable *lusus naturæ* than that which has excited so deep an interest in the Siamese Twins.

BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, DECEMBER 30, 1835.

PRACTICAL PHRENOLOGY.

Some weeks ago, notice was given in this Journal of the forthcoming of a treatise, with the above title, by Silas Jones. The work is since published, and exhibits satisfactory evidence of the author's minute acquaintance with a subject to which all the energy of his inquiring mind has been devoted. Though a multitude of writers have of late enlisted under the banners of this comparatively new and captivating science, they have not all been equally successful in proselyting their readers. The persecution which they have received was never more ineffectually employed to limit the extension of any doctrine ; it has rather stimulated, than retarded, the onward and steady march of phrenology. Ridicule is certainly a potent weapon, and is sometimes the most certain means of subduing even the influence of philosophical truth. The combined efforts of opposers, both in Europe and America, from the day that Dr. Gall announced to the world his novel discovery that the brain, instead of being a single organ, was in reality a congeries of them, by which the characteristic powers of the soul are manifested, have aimed to make this the subject of endless abuse, merriment and vituperation. Such, too, to a considerable extent, has been the destiny, till of late, of all his followers. When Harvey first broached the doctrine of the circulation of the blood, he was assailed by a host of grave, argumentative opponents, who saw nothing in his pretended discovery but gross deception. In admitting that some of his assertions were facts, they could foresee no possible benefit arising from the overthrow of the old, respectable theory, that the blood ran out from the heart during the day and returned again at night. In the general excitement—for the whole profession seems to have been alarmed by a simultaneous panic—the ideas of a double heart and the two circulations were decided to be altogether speculations : it was all ingenious theory, but of no possible service in illustrating either the phenomena of disease or difficult points in physiology. Nothing, in their apprehension, equalled, in beauty and simplicity, the venerable manner of disposing of the blood by squeezing it through the partition between the two ventricles or auricles, as circumstances might require. The lungs, too, were bellows, admirably constructed for blowing a cooling current of air, that the temperature of the body might never rise to an uncomfortable heat. But no power which the antagonists of that great philosopher could wield, succeeded in smothering in embryo the revolution which was effected by his

persevering efforts; and to the end of time, the transcendant brilliancy of Harvey's genius will continue to shine with undiminished splendor.

Such, in a good degree, has been the unabated zeal of those who have no accurate knowledge of phrenology. Without any examination into the improved method of dissecting the brain which Drs. Gall and Spurzheim taught, it is sufficient, in the estimation of many violent adversaries, that the cerebrum is found in the skull—little caring to investigate the origin or distribution of nerves, of which they have only the limited knowledge to be obtained from the professed treatises on human anatomy.

No desire is intended to be expressed, in these observations, that every body should embrace phrenology as an article of faith, before investigating its claim. Those who most carefully examine what has been actually achieved for minute anatomy by the phrenologists, will be struck with the vast accumulation of important facts developed by their untiring industry. It were needless to multiply words, or cite authorities, to prove what must be generally conceded at this day—viz. that even those who totally disbelieve the current distinguishing features of what may strictly be denominated practical phrenology, are indebted to its advocates for much that they know of the minute structure of the brain.

Mr. Jones's book is well calculated to be popular, as there is nothing intricate in it, or above the comprehension of an ordinary capacity. Those who really wish to be better informed by a systematic course of reading, with reference to settling the question whether they will admit, or not, the pretensions of phrenologists, could not find a more acceptable work. We have been delighted with it ourselves, and we feel that to recommend it to the respectful notice of others is but doing justice to the talents and research of the author.

Smallpox.—The smallpox has been introduced into Needham within a few days, by a traveller from N. York. Several cases of varioloid have appeared in Boston, the past week. The patients were immediately removed to the hospital, and are all doing exceedingly well. With a careful eye to the quality of the virus—having in recollection its age, the day it was taken from the vaccine pustule, and the physical condition of the individual from whom it was taken—all the difficulties arising from modified smallpox might be generally obviated in the beginning, in this climate. Varioloid being equally as dangerous to the public health, as the genuine, fully developed smallpox, physicians are bound to be exceedingly watchful.

Dr. Oliver's Physiology.—Not having been furnished with a copy of this recently published work, we have no means of judging of its merits, and therefore can neither condemn nor recommend it to the attention of the profession. That the author is eminently qualified to prepare an excellent treatise, honorable to himself and useful to the world, is beyond a doubt. Dr. Oliver is favorably known as one of the faculty of the medical department of Dartmouth College, N. H.

Pareira brava in Irritable Bladder.—Dr. F. P. Betton, of Germantown, Pa. recommends, in the Philadelphia Journal, the *Cissampelos pereira*, called by the Spainards *Pareira brava*, in cases of irritable bladder. This remedy was much extolled by Helvetius as a lithotriptic, and was formerly so much esteemed by the Brazilians as to be named by them the Universal Medicine. It has been used successfully by Mr. Brodie. It was given in the following proportion by Dr. B.: one ounce of the root to a quart of water, gently boiled down to one half, of which a wineglassful was taken three times a day.

Mass. General Hospital.—There were no operations on Saturday. We take this opportunity to mention an error into which we were led by the reporter, relative to an operation performed upon a boy's knee, some weeks ago, and which should have been corrected sooner ; but hoping for all the particulars to the end of the case, if the patient recovered, the apology has been unfortunately omitted to this late period, without any intention, however, of doing injustice to any one. The condyle, in the case referred to, was not taken out, nor the articulating surface of the lower extremity taken away. A portion of bone above the knee, of the shaft of the femoris, was removed, which was calculated to save the joint. Whenever we can obtain a history of the case, the character and object of the operation will doubtless be more clearly understood.

To Correspondents.—An able article on the abuses of Female Education, is in time for the next Journal.—Cases in Pathological Anatomy have been received, from Dr. Bell, soon to appear—also, from the same author, specimen sheets of "*an attempt to investigate some obscure and undecided doctrines in relation to Smallpox, Varioloid and Vaccination,*" which we shall particularly examine as soon as other papers can be disposed of.—"Medical Etiquette," from Worcester County, and "Cases of Puerperal Peritonitis," are also received.

Died—At New York, David Hosack, M.D. F.R.S. aged 66—whose name is familiar to the profession throughout the Union. We shall give a biographical sketch of his life and services at a future day.—In Woodbury, Conn. Dr. Samuel Steele, 55.—In Plymonth, Mass. Dr. Zaccheus Bartlett, aged 70.

Whole number of deaths in Boston for the week ending Dec. 26, 43. Males, 23—Females, 20.

Of measles, 7—dropsy, 2—infantile, 3—lung fever, 9—brain fever, 1—cramp in the stomach, 1—consumption, 4—ulcers, 1—insane, 1—typhous fever, 3—old age, 1—dropsy on the chest, 1—jaundice, 1—intemperance, 1—inflammation of the bowels, 1—croup, 1—teething, 1—throat disemper, 2—pleurisy, 1—inflammation of the throat, 1.

MEDICAL TUITION.

The subscribers have recently made some additional arrangements for the instruction of medical students. A suitable room is provided, as heretofore, for the use of the pupils ; the necessary books are supplied, and a systematic course of study is recommended. Personal instruction is given to each pupil in each of the several departments of medical knowledge. Every facility is provided for the cultivation of practical anatomy, which the present improved state of the law permits. This department will receive the constant attention of one of the subscribers, who will always give such aid and instruction as the pupils may need.

The pupils have free admission to the lectures on Anatomy, and on Surgery, in the Medical School of Harvard University, and to all the practice of the Massachusetts General Hospital; and generally they have opportunity to attend private surgical operations.

The terms are, 100 dollars per annum ; to be paid in advance.

JOHN C. WARREN,
GEORGE HAYWARD,
ENOCH HALE,
J. M. WARREN.

Boston, October, 1835. Oct 28—6teop

VACCINE VIRUS.

Physicians in any part of the United States may hereafter be furnished with pure vaccine virus, by addressing the editor of the Boston Medical and Surgical Journal—*inclosing one dollar*. Letters must be post-paid, or they will not be taken from the Post Office. The virus will invariably be sent by the first mail, unless some other mode of conveyance is directed. Ten charged quills, an ample quantity for meeting any sudden emergency, and certainly sufficient to propagate a supply from, will be securely packed in a letter. The gentleman who has undertaken to keep the virus, will faithfully supply that which is positively genuine and recently taken. It will also be furnished on application at the Medical Journal office.

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